

10/588493  
JAP20 Rec'd PCT/PTO 04 AUG 2006

Application Data Sheet

**Application Information**

Application Type:: National Stage  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: BIOSENSOR AND METHOD FOR  
OPERATING THE LATTER  
Attorney Docket Number:: 4001-1224  
Request for Early  
Publication?::  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 3  
Small Entity?:: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent No  
Appl.?::

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GERMANY  
Status:: Full Capacity  
Given Name:: ELFRIEDE  
Middle Name::  
Family Name:: SIMON  
Name Suffix::  
City of Residence:: MUNCHEN  
State or Province of  
Residence::  
Country of Residence:: GERMANY  
Street of Mailing WINTHIR STR. 18  
Address::  
City of Mailing Address:: MUNCHEN  
State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: 80639

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GERMANY  
Status:: Full Capacity  
Given Name:: MAXIMILIAN  
Middle Name::  
Family Name:: FLEISCHER  
Name Suffix::  
City of Residence:: HOHENKIRCHEN  
State or Province of  
Residence::  
Country of Residence:: GERMANY  
Street of Mailing SCHLOSSANGERWEG 12  
Address::  
City of Mailing Address:: HOHENKIRCHEN

State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: 85635

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GERMANY  
Status:: Full Capacity  
Given Name:: HANS  
Middle Name::  
Family Name:: MEIXNER  
Name Suffix::  
City of Residence:: HAAR  
State or Province of  
Residence::  
Country of Residence:: GERMANY  
Street of Mailing Address:: MAX-PLANCK-STR. 5  
Address::  
City of Mailing Address:: HAAR  
State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: 85540

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GERMANY  
Status:: Full Capacity  
Given Name:: CORINNA  
Middle Name::  
Family Name:: HAINDL  
Name Suffix::  
City of Residence:: MANNHEIM  
State or Province of  
Residence::  
Country of Residence:: GERMANY  
Street of Mailing Address:: WINDECKSTR. 18

Address::

City of Mailing Address:: MANNHEIM

State or Province of Mailing Address::

Country of Mailing Address:: GERMANY

Postal or Zip Code of Mailing Address:: 68163

**Correspondence Information**

Correspondence Customer 00466

Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP2005/050343	1/27/05

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
GERMANY	102004005710.9	2/5/04	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::